

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Hayat		04/19/01
O.I.P.E. CLASSIFIER	953	32	5/10
FORMALITY REVIEW	TH 953	953	66-11-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		5/8/03	
2		5/10/03	
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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nb/12/01